07/17/2009 10:01

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### **FEC** FORM 3X

### REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines The Council of Insurance Agents & Brokers Political Action Committee 701 Pennsylvania Avenue, NW ADDRESS (number and street) Suite 750 Check if different than previously Washington DC 20004 2608 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A CITY A ZIPCODE A IS THIS NEW **AMENDED** C00039578 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 06 0 1 2009 06 30 2009 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ken A. Crerar Type or Print Name of Treasurer Ken A. Crerar Electronically Filed by 07 17 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

FEC Form 3X (Rev. 02/2003)

### SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS

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Write or Type Committee Name
The Council of Insurance Agents & Brokers Political Action Committee

	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1 2009 Y Y Y		201736.30
	(b) Cash on Hand at Begining of Reporting Period	270168.78	
	(c) Total Receipts (from Line 19)	37243.10	264968.60
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	307411.88	466704.90
·.	Total Disbursements (from Line 31)	100087.87	259380.89
١.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	207324.01	207324.01
).	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 41

Write or Type Committee Name

The Council of Insurance Agents & Brokers Political Action Committee

Report Covering the Period:

From: 0.6

D D D

2009

та.

м м 0 6 <sup>D</sup> 3 0

<sup>Y</sup> 2009

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From:  a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	32157.26	241587.52
	(ii) Unitemized	5085.84	20381.08
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	37243.10	261968.60
(1	b) Political Party Committees	0.00	0.00
•	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	37243.10	261968.60
	Fransfers From Affiliated/Other	0.00	0.00
3. <i>A</i>	All Loans Received	0.00	0.00
	oan Repayments Received  Offsets To Operating Expenditures	0.00	0.00
(	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Political Committees	0.00	3000.00
	Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
	Fransfers from Non-Federal and Levin Funds		
(;	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(1	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	37243.10	264968.60
	otal Federal Receipts subtract Line 18(c) from Line 19)	37243.10	264968.60

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	1007.07	6445.86
	Expenditures(c) Total Operating Expenditures	1007.07	0770.00
	(add 21(a)(i), (a)(ii) and (b))	1007.07	6445.86
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	99080.80	248675.78
24.	Independent Expenditure (use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
28.	Refunds of Contributions To:  (a) Individuals/Persons Other	0.00	2000.00
	Than Political Committees	0.00	2000.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	2000.00
29.	Other Disbursements	0.00	2259.25
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	100087.87	259380.89
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	100007 07	250200 00
	from Line 31)	100087.87	259380.89

### **DETAILED SUMMARY PAGE**

of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	37243.10	261968.60
34. Total Contribution Refunds (from Line 28(d))	0.00	2000.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37243.10	259968.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1007.07	6445.86
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	1007.07	6445.86

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 41 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
	Brokers Political Action Committee		
Full Name (Last, First, Middle Initial) Mr. Michael L. Kapnick		Date of Receipt	
Mailing Address 555 Budlong Street	State Zip Code	06 04 2009	
City Adrian	MI 49221-1405	Transaction ID: 29964927  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer Kapnick Insurance Group	Occupation Insurance Broker		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) Mr. Steven E. Deware		Date of Receipt	
Mailing Address 1 Tallwood Drive		06 01 2009	
City	State Zip Code	Transaction ID: 30016333	
Lincoln  FEC ID number of contributing federal political committee.	RI 02865-1018	Amount of Each Receipt this Period  250.00	
Name of Employer Starkweather & Shepley, Inc.	Occupation Insurance Broker		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. Jeffrey M. Klein		Date of Receipt	
Mailing Address 9807 Glastonbury			
City Charlotte	State Zip Code NC 28270-1605	Transaction ID: 30016334  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer BB&T-McPhail Bray Insuran- ce	Occupation Insurance Broker		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional	al)	1250.00	
	aber only)		

ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE //41   (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Council of Insurance Agents &	Brokers Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Mr. Samuel Fleet			Date of Receipt
Mailing Address 1 Brookfield Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City East Greenwich	State RI	Zip Code 02818-1238	Transaction ID: 30016408  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2500.00
Name of Employer American Wholesale Insura- nce Group (AM Receipt For:  Primary General Other (specify) ▼	Occupation Insurance Aggregate		
Full Name (Last, First, Middle Initial) Mr. Randolph W. McGann Mailing Address 291 Masters Court	1		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 30029104
Johns Island  FEC ID number of contributing federal political committee.	SC C	29455-5723	Amount of Each Receipt this Period 500.00
Name of Employer BB&T - Barger Insurance (BR) Receipt For:  Primary  General  Other (specify) ▼	Occupation Insurance Aggregate		
Full Name (Last, First, Middle Initial) Mr. James Czesak			Date of Receipt
Mailing Address 21250 Hawthorne E Suite 600	Blvd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Torrance	State CA	Zip Code 90503-5506	Transaction ID: 30029127  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Lockton Companies, Inc.	Occupation Insurance		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	I		4000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>(X)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 8 / 41   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Council of Insurance Agents	& Brokers Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Mrs. Elizabeth Ming			Date of Receipt
Mailing Address 2 Fairlane Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Ba</u> kersfield	State CA	Zip Code 93309-2403	Transaction ID: 30029832  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Pan American Underwriters, Inc.	Occupation Insurance		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Kim A. McGillicuddy			Date of Receipt
Mailing Address 1319 Stillson Roa			0 6 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fairfield	State CT	Zip Code 06824-3053	Transaction ID: 30029860  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00024 0000	500.00
Name of Employer Pierson & Smith, Inc.	Occupation Insurance		
Receipt For:  Primary General  Other (specify) ▼	· · · · · · · · · · · · · · · · ·	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Daniel J. Carlton			Date of Receipt
Mailing Address 471 Manor Lane			0 6 0 2 2 0 0 9
City Pelham	State NY	Zip Code 10803-2416	Transaction ID: 30029889  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000 2110	500.00
Name of Employer HM Insurance Group	Occupation Insurance		
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	I		1500.00

ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 41   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Council of Insurance Agents 8	Brokers Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Mr. Austin Madison			Date of Receipt
Mailing Address 5529 Kendall Drive			06 02 7 2009
City Nashville	State TN	Zip Code 37209-4544	Transaction ID: 30030536  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Crichton Brandon Jackson & Ward	Occupation Insurance		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Donald B. Sheehan			Date of Receipt
Mailing Address 115 Falcon Ridge I	Orive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Exeter	State RI	Zip Code 02822-2407	Transaction ID: 30030545
FEC ID number of contributing federal political committee.	C	02022-2407	Amount of Each Receipt this Period 250.00
Name of Employer National Employee Benefit Companies (N	Occupation		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Barry Azarcon			Date of Receipt
Mailing Address 2555 Vineyard Driv	re		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 30030546
Auburn FEC ID number of contributing federal political committee.	CA	95603-7328	Amount of Each Receipt this Period 2500.00
Name of Employer Edgewood Partners Insuran- ce Center (EP	Occupation Insurance	e Broker	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts This Page (options			3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 41 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  The Council of Insurance Agents & Br	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Jeffrey T. Calder Mailing Address 2 Abbott Court  City Orinda  FEC ID number of contributing federal political committee.  Name of Employer Saylor and Hill Co.  Receipt For: Primary General Other (specify)	State Zip Code CA 94563-3501  C  Occupation Insurance broker  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M M O D D O 2 2 0 0 9  Transaction ID: 30030552  Amount of Each Receipt this Period  1000.00
Full Name (Last, First, Middle Initial) Mr. Michael J. Sullivan Mailing Address 27455 Bridle Place City Chantilly FEC ID number of contributing federal political committee.  Name of Employer Digital Insurance  Receipt For: Primary General Other (specify)	State Zip Code VA 20152-6410  C  Occupation Insurance Broker  Aggregate Year-to-Date   1000.00	Date of Receipt  M M M / D D / 2009  Transaction ID: 30030554  Amount of Each Receipt this Period  1000.00
Full Name (Last, First, Middle Initial) Ms. Mary Setter  Mailing Address 18474 Schroers Farm  City  Eden Prairie  FEC ID number of contributing federal political committee.  Name of Employer RJF Agencies, Inc.  Receipt For:  Primary  General  Other (specify)	Road  State Zip Code MN 55347-1047  C  Occupation Insurance Broker  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M M O D D Y Y Y Y Y Y  Transaction ID: 30030555  Amount of Each Receipt this Period  1000.00
SUBTOTAL of Receipts This Page (optional) .		3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 41 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to B Brokers Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. John Jennings  Mailing Address 240 Killarney Drive  City  Berkeley Heights  FEC ID number of contributing federal political committee.  Name of Employer Crump Insurance Services  Receipt For:  Primary General	State Zip Code NJ 07922-2156  C  Occupation Insurance Broker  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Ms. Karen Farris  Mailing Address 7238 Briarmeadov  City  Dallas  FEC ID number of contributing federal political committee.  Name of Employer Roach Howard Smith & Hunter Receipt For:	State Zip Code TX 75230  C  Occupation President & CEO  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Douglas F. Bixby  Mailing Address 27 Thornley Drive  City Chatham  FEC ID number of contributing federal political committee.  Name of Employer William Gallagher Associates Receipt For:	State Zip Code NJ 07928-1360  C  Occupation Insurance Broker	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	3250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 41 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Council of Insurance Agents & Bi	rokers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Larry D. Pittman		Date of Receipt
Mailing Address 4820 Star Ridge Lane		06 03 2009
City Frisco	State Zip Code TX 75034-5128	Transaction ID: 30033598  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 75004 5125	500.00
Name of Employer Roach Howard Smith & Bart- on	Occupation Insurance Broker	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Richard H. Buckerfield	Date of Receipt	
Mailing Address 1000 Morningside Mo	06 16 2009	
City	State Zip Code	Transaction ID: 30120312
Glen Ellen	CA 95442	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer Beere & Purves Inc.	Occupation Insurance Broker	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Mr. Rush D. Dixon	I	Date of Receipt
Mailing Address 1330 Parkside Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30120319
Berkeley Springs  FEC ID number of contributing federal political committee.	WV 25411-6386	Amount of Each Receipt this Period 500.00
Name of Employer Early, Cassidy & Schillin-	Occupation Insurance Broker	
g, Inc. Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional) .	1	3000.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 41 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  The Council of Insurance Agents & Brown Street, S	name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. Jeff Schilling  Mailing Address 1375 Piccard Drive Suite 375  City  Rockville  FEC ID number of contributing federal political committee.  Name of Employer Early, Cassidy & Schilling, Inc.  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 20850-4311  C  Occupation Insurance Broker  Aggregate Year-to-Date   500.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. J. Martin Brayboy Mailing Address 64 Whetstone Road  City Harwinton  FEC ID number of contributing federal political committee.  Name of Employer Rose & Kiernan, Inc.  Receipt For: Primary General Other (specify)	State Zip Code CT 06791-2211  C  Occupation Insurance Broker  Aggregate Year-to-Date  2500.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Gregory Thompson Mailing Address 2662 Orchard Run SE  City Atlanta  FEC ID number of contributing federal political committee.  Name of Employer THOMCO (Thompson Insurance Enterprises Receipt For: Primary General Other (specify)	State Zip Code GA 30339-4651  C  Occupation Insurance Broker  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		3500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 41 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  The Council of Insurance Agents &	d Statements may not be sold or used by any personante name and address of any political committee to Brokers Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Larry Jolley Mailing Address 94 Arkavalley Road City Greenbrier FEC ID number of contributing	State Zip Code AR 72058-9628	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Ramsey, Krug, Farrell & Lensing Receipt For:  Primary General Other (specify) ▼	Occupation Insurance Broker  Aggregate Year-to-Date   1000.00	
Full Name (Last, First, Middle Initial) Mr. Martin P. Hughes Mailing Address 45 East Bellevue Pla	ace	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Chicago</u> FEC ID number of contributing federal political committee.	State Zip Code  IL 60611-1133  C	Transaction ID: 30120364  Amount of Each Receipt this Period  1500.00
Name of Employer Hub International Ltd.  Receipt For:  Primary General Other (specify) ▼	Occupation Insurance Broker  Aggregate Year-to-Date   1500.00	
Full Name (Last, First, Middle Initial) Mr. Edward G. Schreiber Mailing Address 505 South 3rd Street	et .	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City  Bellaire  FEC ID number of contributing federal political committee.	State Zip Code TX 77401-5003	Transaction ID: 30120376  Amount of Each Receipt this Period  500.00
Name of Employer GEM Insurance Agencies, L.P. Receipt For:	Occupation Insurance Broker	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	]
SUBTOTAL of Receipts This Page (optional	)	3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate scheduler for each category of the Detailed Summary Page	(check drily drie)
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any the name and address of any political comm	person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Michael D. Halter Mailing Address 12480 Rivercrest D	rive	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Little Rock</u> FEC ID number of contributing federal political committee.	State Zip Code AR 72212-1440  C	Transaction ID: 30120520  Amount of Each Receipt this Period  250.00
Name of Employer Ramsey, Krug, Farrell & Lensing Receipt For:  Primary  Other (specify) ▼	Occupation Insurance Broker  Aggregate Year-to-Date   250.0	0
Full Name (Last, First, Middle Initial) Mr. Mark L. Stokes Mailing Address 901 North 190th Str	reet	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Elkhorn	State Zip Code NE 68022-2938	Transaction ID: 30120547  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Grace-Mayer Insurance Age- ncy Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Insurance Broker  Aggregate Year-to-Date   500.0	0
Full Name (Last, First, Middle Initial) Ms. Cynthia J. Bowman		Date of Receipt
Mailing Address 1360 E 9th Street Suite 600		06 19 2009
City <u>Cleveland</u>	State Zip Code OH 44114-1737	Transaction ID: 30120553  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer Oswald Companies	Occupation Insurance Broker	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 540.0	0
	•	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 41 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any personderss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Council of Insurance Agents & Br	okers Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial)  Mr. William E. Brancovsky  Mailing Address 6253 S. Applecross Ro	nad		Date of Receipt
	City	State	Zip Code	0 6 1 9 2 0 0 9  Transaction ID: 30120554
	Highland Heights	OH	44143-3730	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Oswald Companies	Occupation Insurance		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
В.	Full Name (Last, First, Middle Initial) Mr. Paul Catania Mailing Address 5758 Williamsburg Cir	rolo		Date of Receipt
	Mailing Address 5/56 Williamsburg Cir	cie		06 19 2009
	City	State	Zip Code	Transaction ID: 30120560
	Hudson	OH	44236-3780	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Oswald Companies	Occupation Insurance		
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 360.00	]
_ С.	Full Name (Last, First, Middle Initial) Ms. Kathleen A. Daberko			Date of Receipt
	Mailing Address 1360 E 9th Street Suite 600			06 19 2009
	City	State	Zip Code	Transaction ID: 30120564
	Cleveland FEC ID number of contributing federal political committee.	ОН	44114-1737	Amount of Each Receipt this Period 42.00
	Name of Employer Oswald Companies	Occupation Insurance		
	Receipt For:  Primary General  Other (specify) ▼	<del>, '</del>	e Year-to-Date ▼ 252.00	
	SUBTOTAL of Receipts This Page (optional)			142.00
r	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 41 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  The Council of Insurance Agents & B	ne name and add	ress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Theresa DiVincenzo  Mailing Address 1360 E 9th Street Suite 600  City Cleveland  FEC ID number of contributing	State OH	Zip Code 44114-1737	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary  Other (specify) ▼	Occupation Insurance		
Full Name (Last, First, Middle Initial) Mr. Joseph R. Eardley  Mailing Address 1360 E 9th Street Suite 600  City Cleveland  FEC ID number of contributing federal political committee.  Name of Employer Oswald Companies  Receipt For: Primary General Other (specify)	State OH C Occupation Insurance Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Robert W. Edmonds, Ill  Mailing Address 1360 E 9th Street Suite 600  City Cleveland  FEC ID number of contributing federal political committee.  Name of Employer Oswald Companies  Receipt For: Primary General Other (specify)	State OH C Occupation Insurance Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			125.26

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the  Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 41 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  The Council of Insurance Agents &	d Statements may not be sold or used by any persor the name and address of any political committee to a	n for the purpose of soliciting contributions solicit contributions from such committee.
	Diokers Folitical Action Committee	1
Full Name (Last, First, Middle Initial) Ms. Gloria I. Jones		Date of Receipt
Mailing Address 1360 E 9th Street Suite 600		0 6 1 9 2 0 0 9
City	State Zip Code	Transaction ID: 30120570
Cleveland	OH 44114-1737	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.68
Name of Employer Oswald Companies	Occupation Insurance Broker	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.08	
Full Name (Last, First, Middle Initial) Mr. James M. Kenny		Date of Receipt
Mailing Address 1360 E 9th Street Suite 600		0 6 1 9 2 0 0 9
City	State Zip Code	Transaction ID: 30120571
Cleveland	OH 44114-1737	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Oswald Companies	Occupation Insurance Broker	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initial) Mr. Eric L. Krieg		Date of Receipt
Mailing Address 31724 Leeward CT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30120574
Avon Lake	OH 44012-2923	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Oswald Companies	Occupation Insurance Broker	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
SUBTOTAL of Receipts This Page (optional	)	125.68

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 41 (check only one)    X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to	
The Council of Insurance Agents &	Brokers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. William J. Leonard		Date of Receipt
Mailing Address 29767 Devonshire C		06 19 2009
City Westlake	State Zip Code OH 44145-3895	Transaction ID: 30120576
FEC ID number of contributing federal political committee.	C 44145-3695	Amount of Each Receipt this Period 41.66
Name of Employer Oswald Companies	Occupation Insurance Broker	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  249.96	
Full Name (Last, First, Middle Initial) Mr. Edward X. McNamara		Date of Receipt
Mailing Address 1360 E 9th Street Suite 600		06 19 2009
City	State Zip Code	Transaction ID: 30120577
Cleveland	OH 44114-1737	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer Oswald Companies	Occupation Insurance Broker	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	504.00	
Full Name (Last, First, Middle Initial) Mr. Todd R. Miller		Date of Receipt
Mailing Address 1360 E 9th Street Suite 600		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30120581
Cleveland FEC ID number of contributing	OH 44114-1737	Amount of Each Receipt this Period
federal political committee.	C	41.66
Name of Employer Oswald Companies	Occupation Insurance Broker	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 249.96	
SUBTOTAL of Receipts This Page (optional	l)	167.32

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 20 / 41 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  The Council of Insurance Agents & B	e name and address o	f any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Michael G. Miron  Mailing Address 1360 E 9th Street Suite 600  City Cleveland  FEC ID number of contributing federal political committee.	State Zi	p Code 4114-1737	Date of Receipt  M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Oswald Companies  Receipt For:  Primary General  Other (specify) ▼	Occupation Insurance Brok Aggregate Year-t		]
Full Name (Last, First, Middle Initial) Mr. Steffan J. Moody Mailing Address 1360 E 9th Street Suite 600 City Cleveland		p Code 4114-1737	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Oswald Companies  Receipt For: Primary General Other (specify)	Occupation Insurance Brok Aggregate Year-t		42.00
Full Name (Last, First, Middle Initial) Mr. Brian T. Muldoon  Mailing Address 1360 E 9th Street Suite 600  City Cleveland		p Code 4114-1737	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Oswald Companies  Receipt For:  Primary General	Occupation Insurance Brok Aggregate Year-t		46.00
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)			138.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 41 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  The Council of Insurance Agents &	d Statements may not be sold or used by any personal the name and address of any political committee to Brokers Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David M. Orloff Mailing Address 26441 Shaker Blvd.  City Beachwood  FEC ID number of contributing federal political committee.  Name of Employer Oswald Companies	State Zip Code OH 44122-7115  C Occupation	Date of Receipt    M M M
Receipt For:  Primary General  Other (specify) ▼	Insurance Broker  Aggregate Year-to-Date ▼  252.00	
Full Name (Last, First, Middle Initial)  Ms. Melissa Robinson  Mailing Address 4024 W. 157th Street	et	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cleveland FEC ID number of contributing federal political committee.	State Zip Code OH 44135-1232  C	Transaction ID: 30120591  Amount of Each Receipt this Period  42.00
Name of Employer Oswald Companies  Receipt For:  Primary General  Other (specify) ▼	Occupation Insurance Broker  Aggregate Year-to-Date   252.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey J. Schwab  Mailing Address 1360 E 9th Street Suite 600  City	State Zip Code	Date of Receipt  0 6 19 2009  Transaction ID: 30120592
CLEVELAND  FEC ID number of contributing federal political committee.	OH 44114-1737	Amount of Each Receipt this Period  84.00
Name of Employer Oswald Companies	Occupation Insurance Broker	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	
SUBTOTAL of Receipts This Page (optional	)	168.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 41 (check only one)    X
or fo	information copied from such Reports and S r commercial purposes, other than using the IAME OF COMMITTEE (In Full) The Council of Insurance Agents & Br	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	full Name (Last, First, Middle Initial)	OKEIS I OIILIO	al Action Committee	
-	Mr. Scott Naugle Mailing Address 1302 East 2nd Street			Date of Receipt  0 6 2 2 2 0 0 9
	City	State	Zip Code	Transaction ID: 30121730
F	Pass Christian FEC ID number of contributing ederal political committee.	MS C	39571	Amount of Each Receipt this Period 1000.00
, S r	lame of Employer Stewart-Sneed-Hewes/Banco- pSouth Insur leceipt For: Primary General Other (specify)	Occupation Insurance Aggregate		
S. <u>N</u>	full Name (Last, First, Middle Initial) Mr. William P. Clifford Mailing Address 17 Hazeltine Drive			Date of Receipt
Ċ	Dity	State	Zip Code	0 6 2 2 2 0 0 9  Transaction ID: 30121735
F	Cumberland EC ID number of contributing ederal political committee.	ME C	04021-3409	Amount of Each Receipt this Period 500.00
7	lame of Employer <sup>-</sup> D Banknorth Insurance Gr- up	Occupation Insurance		
	leceipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	rull Name (Last, First, Middle Initial) Mr. Ken L. Ray			Date of Receipt
N	Mailing Address 110 Beaver Bend			06 22 7 2009
	City	State	Zip Code	Transaction ID: 30121736
F	Canton EC ID number of contributing ederal political committee.	MS C	39046-9296	Amount of Each Receipt this Period 500.00
<u>r</u>	lame of Employer Stewart-Sneed-Hewes/Banco- pSouth Insur	Occupatio Insuranc		
F	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
SUI	BTOTAL of Receipts This Page (optional)			2000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 41 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  The Council of Insurance Agents & B	e name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. James E. Johnson Mailing Address 2629 Yosemite Avenu City Saint Louis Park FEC ID number of contributing federal political committee.  Name of Employer RJF Agencies, Inc. Receipt For:	State MN  C  Occupatio Insurance		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms. Jill Lowder  Mailing Address 8511 Drake Court	1 1	500.00	Date of Receipt    M M
City Chanhassen  FEC ID number of contributing federal political committee.  Name of Employer RJF Agencies, Inc.  Receipt For:  □ Primary □ General □ Other (specify) ▼	State MN  C  Occupatio Insuranc  Aggregate		Transaction ID: 30121752  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  Mr. Richard Kerr  Mailing Address 17611 Cedar Creek C  City  Dallas  FEC ID number of contributing federal political committee.  Name of Employer MarketScout  Receipt For:	State TX  C  Occupatio Chairma		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)   SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		201.00	951.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 41 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  The Council of Insurance Agents & Br		on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Angelo M. Nardi  Mailing Address 195 Ashbury Circle  City Park Ridge  FEC ID number of contributing federal political committee.  Name of Employer Gallagher Benefits Services, Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60068-2874  C  Occupation Insurance Broker  Aggregate Year-to-Date   500.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Mr. John Neumaier Mailing Address 40W246 Ralph Waldo  City Saint Charles  FEC ID number of contributing federal political committee.	State Zip Code IL 60175-6532	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Arthur J. Gallagher & Co.  Receipt For:  Primary  General  Other (specify) ▼	Occupation Insurance Broker  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) Mr. David M. Ziegler Mailing Address 12772 NW 15th Street  City Coral Springs  FEC ID number of contributing federal political committee.	State Zip Code FL 33071-5437	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Arthur J. Gallagher & Co.  Receipt For:  Primary  General  Other (specify) ▼	Occupation Insurance broker  Aggregate Year-to-Date   2000.00	
SUBTOTAL of Receipts This Page (optional)		2000.00

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SCHEDULE B (FEC Form 3X)	Harasanaha I. I.I.()	FOR LINE	NUMBER:	PAGE 25/41	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only			
	Detailed Summary Page	X 21b	22 23	24 25 26	
Any Information copied from such Reports and Staten	nents may not be sold or used by	27 27 any person fo	28a 28b	28c 29 30b	
or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
The Council of Insurance Agents & Broker	s Political Action Committee	е			
Full Name (Last, First, Middle Initial) Authorize.Net			Transaction ID: Date of Disburser		
Mailing Address 808 East Utah Valley Dri	ve		06 0 2	2 0 0 9	
City American Fork	State Zip Code UT 84003		Amount of Each D	isbursement this Period	
Purpose of Disbursement	Г			60.00	
Candidate Name		001 Category/ Type			
Senate President	ement For: Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) Wired For Change			Transaction ID: Date of Disbursem	nent	
Mailing Address 1700 Connecticut Avenu Suite 403	e, NW		06 04	2 0 0 9 °	
City Washington	State Zip Code DC 20009		Amount of Each D	isbursement this Period	
Purpose of Disbursement		001		400.00	
Candidate Name	C	Category/ Type			
Senate President	ement For: Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) American Express			Transaction ID: Date of Disbursem	nent	
Mailing Address P.O. Box 2878			06 7 23 0	2009	
City Omaha	State Zip Code NE 68103-2878		Amount of Each D	risbursement this Period	
Purpose of Disbursement		• • •		319.30	
Candidate Name		001 Category/ Type			
Senate President	ement For: Primary General Other (specify)				
State: District:					
SUBTOTAL of Disbursements This Page (optional)		<u></u>		779.30	

### Image# 29934306213

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS  Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	for each category of the Detailed Summary Page    Check   Chec	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  The Council of Insurance Agents & Brokers		
Full Name (Last, First, Middle Initial) First Data  Mailing Address P.O. Box 6600		Transaction ID: 30237732 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Hagerstown Purpose of Disbursement  Candidate Name	State Zip Code MD 21741-6600  001 Category Type	Amount of Each Disbursement this Period  227.77
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	227.77
TOTAL This Period (last page this line number only)	•	1007.07

	B (FEC Form 3X)	Use sepa	arate schedule(s)		NUMBER: PAGE 27 / 41
ITEMIZED D	DISBURSEMENTS	for each	category of the Summary Page	(check onl	y one)  22   X   23   24   25   28a   28b   28c   29   1
					for the purpose of soliciting contributions olicit contributions from such committee
\ \	MMITTEE (In Full) of Insurance Agents & Br	okers Political	Action Commi	ttee	
	Name (Last, First, Middle Initial) mmittee To Elect Chris Murphy				Transaction ID: 30132825 Date of Disbursement
Mailing Addres	s P.O. Box 127				$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Cheshire		State CT	Zip Code 06410		Amount of Each Disbursement this Period
Purpose of Dis  Candidate Nan				011	2000.00
	pher S. Murphy	bursement For:	2010	Category/ Type	
State: CT	Senate President District: 05	X Primary Other (spe	General		
	t, First, Middle Initial)				Transaction ID: 30132826 Date of Disbursement
Mailing Addres	s PO Box 6155				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & Y \\ D & Q & Q & Q & Q \end{bmatrix}$
City San Antonio		State TX	Zip Code 78209		Amount of Each Disbursement this Perio
Purpose of Dis				011	1000.00
Candidate Nan Rep. Lamar	S. Smith			Category/ Type	
Office Sought: State: TX	X House Dis Senate President District: 21	bursement For:  X Primary Other (spe	2010 General		
	t, First, Middle Initial)				Transaction ID: 30132827 Date of Disbursement
Friends Of D	011110 1 1000				
•					06 26 7 2009
Friends Of D		State FL	Zip Code 33807		Amount of Each Disbursement this Perio
Friends Of D  Mailing Addres  City Lakeland  Purpose of Dis	s PO Box 7310 bursement			011	
Friends Of D  Mailing Addres  City Lakeland Purpose of Dis  Candidate Nan Mr. Dennis F	s PO Box 7310  bursement ne Ross	FL	33807	011 Category/ Type	Amount of Each Disbursement this Perio
Friends Of D  Mailing Addres  City Lakeland  Purpose of Dis  Candidate Nan	s PO Box 7310  bursement ne Ross		2010 General	Category/	Amount of Each Disbursement this Period

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER:	PA	GE 28/	41
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check or	nly one) 22   X 23	3 🔲 24	☐ 25	☐ 26
	Detailed Summary Page	27	28a 28		29	30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nan						
NAME OF COMMITTEE (In Full)						
The Council of Insurance Agents & Broke	rs Political Action Committee	е				
Full Name (Last, First, Middle Initial) Melissa Bean For Congress			Transaction Date of Disbu		828	
Mailing Address PO Box 3068			06	<sup>D</sup> 2 6	žoŏ	9 <sup>Y</sup>
City Barrington	State Zip Code IL 60010		Amount of Ea	ach Disburse	ment this	Period
Purpose of Disbursement					1000.0	0
Candidate Name Rep. Melissa L. Bean		011 Category/ Type				
Senate >	ement For: 2010 Primary General Other (specify)					
State: IL District: 08  Full Name (Last, First, Middle Initial)						
Ben Nelson for US Senate			Transaction Date of Disbu		830	
Mailing Address 426 C Street, NE			06 /	<sup>D</sup> 2 6 / Y	žoŏ	9 <sup>Y</sup>
City Washington	State Zip Code DC 20002		Amount of Ea	ach Disburse		
Purpose of Disbursement		011			1000.0	0
Candidate Name Ben Nelson		Category/ Type				
X Senate >	ement For: 2012 Primary General Other (specify)					
State: NE District: Full Name (Last, First, Middle Initial)						
National Republican Senatorial Committe	е		Transaction Date of Disbu	ursement		Y
Mailing Address 425 2nd Street NE			06 /	<sup>D</sup> 26 / Y	žoŏ	9
City Washington	State Zip Code DC 20002		Amount of Ea			
Purpose of Disbursement	Г		L		15000.0	0
Candidate Name		011 Category/ Type				
Senate President	ement For: Primary General Other (specify)					
State: District:						
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>		1	7000.0	0

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	-	PAGE 29 / 41				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	one) 22 X 23 28a 28b	24 25 26 28c 29 30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)	and address of any political C			om saon committee				
The Council of Insurance Agents & Brokers	Political Action Commit	tee						
Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress			Transaction ID Date of Disburs					
Mailing Address P.O. Box 2232			06 / 2	26 7 2009				
•	State Zip Code PA 19046		Amount of Each	Disbursement this Period				
Purpose of Disbursement		011		1000.00				
Candidate Name Rep. Allyson Y. Schwartz	2010	Category/ Type						
	ment For: 2010 Primary General Other (specify)							
State: PA District: 13								
Full Name (Last, First, Middle Initial) Portman for Congress Committee			Transaction ID Date of Disburs	ement				
Mailing Address 203 Miami			06	26 7 2009				
•	State Zip Code OH 45174		Amount of Each	Disbursement this Period				
Purpose of Disbursement		011		1000.00				
Candidate Name Rob Portman		Category/ Type						
	ment For: 2010 Primary General Other (specify)							
Full Name (Last, First, Middle Initial) A New Direction PAC			Transaction ID Date of Disburs					
Mailing Address P.O. Box 4234			06 / 2	26 7 2009				
	State Zip Code NH 03302		Amount of Each	Disbursement this Period				
Purpose of Disbursement		011		1000.00				
Candidate Name A New Direction PAC		Category/ Type						
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)							
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>		3000.00				
TOTAL This Period (last page this line number only)								

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	) FOR LINE	
FEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one)  22
ny Information copied from such Reports and Stater r for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	e and address of any pointed		ion continuations from such committee
The Council of Insurance Agents & Broker	s Political Action Comm	ittee	
Full Name (Last, First, Middle Initial) Bachus for Congress			<b>Transaction ID:</b> 30132858 Date of Disbursement
Mailing Address 308 LaPrado Circle			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & O \end{smallmatrix} \end{bmatrix} $
City Birmingham	State Zip Code AL 35209		Amount of Each Disbursement this Period
Purpose of Disbursement		011	5000.00
Candidate Name Spencer Bachus		Category/ Type	
-	ement For: 2010 Primary General Other (specify)		
State: AL District: 06			
Full Name (Last, First, Middle Initial) Steve Cohen For Congress			Transaction ID: 30132860 Date of Disbursement
Mailing Address 349 Kenilworth			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix}  /  \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix}  /  \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & Q & Y \end{bmatrix} $
City Memphis	State Zip Code TN 38112		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name Mr. Steve Cohen		Category/ Type	
	ement For: 2010 Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: 30132874
Jim Himes For Congress			Date of Disbursement
Mailing Address 857 Post Road, #312 Box 456			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix}  /  \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix}  /  \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & Q & O & Q \end{smallmatrix} \end{bmatrix}  $
City Fairfield	State Zip Code CT 06824		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2000.00
Candidate Name Mr. Jim Himes		Category/ Type	
Senate X President	ement For: 2010 Primary General Other (specify)		
O OT District OA			
State: CT District: 04			
SUBTOTAL of Disbursements This Page (optional)			8000.00

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r fo	or commercial pur NAME OF COMM	ed from such Reports a poses, other than usin MITTEE (In Full) Insurance Agents	g the name	and addre	ss of any political	com									
	Friends Of Erik									sactio of Dis	burse	3013 ment		0 ŏ 9	Y
	Mailing Address	P.O. Box 44369 250 Prairie Cen	ter Drive												
	City Eden Prairie			State MN	Zip Code 55344				Amou	unt of I	Each	Disburs	-		eric
	Purpose of Disbu Candidate Name Mr. Erik Paulse					Ca	011 atego Type	ory/		•	•	•	200	00.00	
	Office Sought:	X House Senate President District: 03	Disburser X	ment For: Primary Other (spe	2010 General ecify)		7)								
	Full Name (Last, Melissa Bean F Mailing Address	First, Middle Initial) For Congress PO Box 3068								of Dis	burse	3013 ment 2		0 ŏ 9	Y
	City Barrington			State IL	Zip Code 60010				Amou	unt of I	Each	Disburs	sement	this P	eric
	Purpose of Disbu	rsement		· <u> </u>	000.0	Г	011		L.		-		100	00.00	
	Candidate Name Rep. Melissa L	. Bean				Ca	tego Type	ory/							
	Office Sought:	X House Senate President District: 08	Disburser X	ment For: Primary Other (spe	2010 General		<u> </u>								
	Full Name (Last, Crowley for Co	First, Middle Initial) ngress							Date	of Dis	burse		2883		
	Mailing Address	80 F Street NW Number 804							0 <sup>M</sup> 6	M /	<sup>D</sup> 1	8 /	ž	0 ŏ 9	Y
	City Washington			State DC	Zip Code 20001				Amou	unt of I	Each	Disburs	ement	this P	eric
	Purpose of Disbu	rsement				Г	011		L.				500	00.00	
	Candidate Name Joseph Crowle	у				Ca	tego Type	ory/							
	Office Sought: State: NY	X House Senate President District: 07	Disburser X	ment For: Primary Other (spe	2010 General		-								
	Olalo. 111	District. 07													

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$\rangle$	The Council of Insurance Agents & Broker	s Political Action Comm	ittee									
	Full Name (Last, First, Middle Initial) Judy Biggert For Congress					Date of	of Dis	sburse				V
	Mailing Address 2800 Shirlington Road Suite 405					0 6	M /				Ý 0 Ŏ 9	
	City Arlington	State Zip Code VA 22206				Amou	nt of	Each	Disbur		nt this P	-
	Purpose of Disbursement  Candidate Name		_	011	NOV/		•			10	00.00	
	Judy Biggert	ement For: 2010		tego Type								
	Senate X President	Primary General Other (specify) ▼										
	State: IL District: 13  Full Name (Last, First, Middle Initial)											
	Brad Miller For United States Congress					Date of		sburse	D /			Υ
	Mailing Address PO Box 10322					0 6		1	8	2	2 0 0 9	
	City Raleigh	State Zip Code NC 27605				Amou	nt of	Each	Disbur		nt this P	eriod
	Purpose of Disbursement  Candidate Name		-	011 atego			•	•		10	,00.00	
	Rep. Bradley Miller		1	Туре	-							
	ů X	ement For: 2010 Primary General Other (specify)										
	Full Name (Last, First, Middle Initial) Ben Nelson for US Senate					Trans	of Dis	sburse	ement	32899	_	·
	Mailing Address 426 C Street, NE					0 <sup>M</sup> 6	M /	<sup>D</sup> 2	6	Ý 2	Ý 0 Ŏ 9	Y
	City Washington	State Zip Code DC 20002				Amou	nt of	Each	Disbur		nt this P	-
	Purpose of Disbursement		-	011		L.	_			10	00.00	_
	Candidate Name Ben Nelson			itego Type								
		ement For: 2012										
	Office Sought:    House   Disburse   X Senate   President	Primary X General Other (specify)										
	x Senate	Primary X General										

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						n for the purpose of soliciting contributions solicit contributions from such committee
I \	NAME OF COMMITTEE (In Full) The Council of Insurance Age	nts & Brokers	Political	Action Commi	ittee	
	Full Name (Last, First, Middle Initia Friends Of Byron Dorgan	l)				Transaction ID: 30132903 Date of Disbursement
N	Mailing Address PO Box 871					0 6 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Dity Bismarck		State ND	Zip Code 58502		Amount of Each Disbursement this Period
	Purpose of Disbursement				011	1000.00
S	Candidate Name Sen. Byron L. Dorgan				Category/ Type	
	Office Sought:  X Senate President  State: ND  District:	Disburser	ment For: Primary Other (spe	2010 General ecify) ▼		
F	State: ND District: Full Name (Last, First, Middle Initia Pennsylvanians For Kanjorsk	•				Transaction ID: 30132913 Date of Disbursement
N	Mailing Address 103 South F	lanover Stree		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	Dity Nanticoke		State PA	Zip Code 18634		Amount of Each Disbursement this Period
P	Purpose of Disbursement				011	1000.00
$\sim$	Candidate Name Rep. Paul E. Kanjorski				Category/ Type	
F	<u> </u>					
F	Office Sought: X House Senate President	Disburser X	ment For: Primary Other (spe	2010 General ecify) ▼		
F S	Office Sought: X House Senate	X	Primary	General		Transaction ID: 30132917 Date of Disbursement
F S F E	Office Sought:  X House Senate President State: PA District: 11 Full Name (Last, First, Middle Initial Bennet For Colorado	X	Primary Other (spe	General		
F C S F E	Office Sought:  X House Senate President State: PA District: 11 Full Name (Last, First, Middle Initial Bennet For Colorado	Street Suite 1	Primary Other (spe	General		Date of Disbursement  O 6 M  Amount of Each Disbursement this Perior
SS	Office Sought:  X House Senate President State: PA District: 11  Full Name (Last, First, Middle Initial Bennet For Colorado  Mailing Address 1900 Grant  City Denver  Purpose of Disbursement	Street Suite 1	Primary Other (spe	General ecify) ▼  Zip Code	011	Date of Disbursement  O 6 1 7 2 0 0 9
S S F E E C C C C C C C C C C C C C C C C C	Office Sought:  X House Senate President State: PA District: 11  Full Name (Last, First, Middle Initial Bennet For Colorado  Mailing Address 1900 Grant  City Denver Purpose of Disbursement  Candidate Name Mr. Michael Bennet	Street Suite 1	Primary Other (spe 170 State CO	General ecify) ▼  Zip Code 80203	011 Category/ Type	Date of Disbursement  O 6 M / D 1 7 Y Y Y O 9 9  Amount of Each Disbursement this Perior
S S F E C C C C N C C C C C C C C C C C C C C	Office Sought:  X House Senate President State: PA District: 11  Full Name (Last, First, Middle Initial Bennet For Colorado  Mailing Address 1900 Grant  District: 12  Denver  Purpose of Disbursement  Candidate Name	Street Suite 1	Primary Other (spe 170 State CO	General ecify) ▼  Zip Code 80203  2010  General	Category/	Date of Disbursement  M 6 M / D 1 D / Y 2 0 0 9  Amount of Each Disbursement this Period

CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 34 / 41 (check only one)
TEMIZED DISBURSEMENTS	Detailed Summary Page	21b 22 X 23 24 25 27 28a 28b 28c 29
ny Information copied from such Reports and State for commercial purposes, other than using the nar		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full)		
The Council of Insurance Agents & Broke	rs Political Action Committee	
Full Name (Last, First, Middle Initial) Kilroy For Congress		Transaction ID: 30132919 Date of Disbursement
Mailing Address P.O. Box 2582 Ste 305		06 0 1 2 7 2 0 0 9
City Columbus	State Zip Code OH 43216	Amount of Each Disbursement this Perio
Purpose of Disbursement	43210	1000.00
i dipose oi Disbuisement		11
Candidate Name Rep. Mary Jo Kilroy		egory/ ype
Senate President	ement For: 2010  ( Primary General Other (specify)	
State: OH District: 15		
Full Name (Last, First, Middle Initial) Friends Of John Tanner		<b>Transaction ID:</b> 30132924 Date of Disbursement
Mailing Address Post Office Box 1994		06 06 7 01 2 7 2 0 0 9
City Union City	State Zip Code TN 38281	Amount of Each Disbursement this Period
Purpose of Disbursement		1500.00
Candidate Name Rep. John S. Tanner		egory/ ype
9 1	ement For: 2010  Primary General  Other (specify)	
Full Name (Last, First, Middle Initial) Moore for Congress		Transaction ID: 30132926 Date of Disbursement
Mailing Address 80 F Street NW Number 804		06 06 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
City Washington	State Zip Code DC 20001	Amount of Each Disbursement this Perio
Purpose of Disbursement		2000.00
Candidate Name Dennis Moore	Cat	egory/ ype
Senate 2	ement For: 2010 Primary General Other (specify)	
State: KS District: 03		
		4500.00

SCHEDULE B (FEC F	y Use se	eparate schedule(s)		NUMBER: PAGE 35 / 41
ITEMIZED DISBURSE	MENTS for each	ch category of the ed Summary Page	(check onl	y one) 22   X   23   24   25   28a   28b   28c   29   1
				for the purpose of soliciting contributions slicit contributions from such committee
NAME OF COMMITTEE (In F	ull)			
Full Name (Last, First, Middle Michaud For Congress	nitial)			Transaction ID: 30132927 Date of Disbursement
Mailing Address 213 List	oon St			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
City Lewiston	State ME	Zip Code 04240		Amount of Each Disbursement this Period
Purpose of Disbursement			011	1000.00
Candidate Name Rep. Michael H. Michaud  Office Sought: X House	Disbursement For	: 2010	Category/ Type	
Senate Preside State: ME District: 02	x Primary Other (s			
Full Name (Last, First, Middle Perlmutter For Congress				Transaction ID: 30132930 Date of Disbursement
	ungfield Street #264		0 6 M / D 1 D / Y Y Y O Y 9 Y	
City Wheat Ridge	State CO	Zip Code 80033		Amount of Each Disbursement this Perio
Purpose of Disbursement		00000	011	1000.00
Candidate Name Rep. Edwin Perlmutter			Category/ Type	
Office Sought: X House Senate Preside				
State: CO District: 07  Full Name (Last, First, Middle  Adler For Congress				Transaction ID: 30132933 Date of Disbursement
	ntswood Drive			0 6 M / D 1 D / Y Y Y O O 9
City Marlton	State NJ	Zip Code 08053		Amount of Each Disbursement this Perio
Purpose of Disbursement			011	2500.00
Candidate Name Mr. John Adler			Category/ Type	
Office Sought: X House	Disbursement For			
Senate  Preside  State: NJ  District: 03		specify)		

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y Information copied from such Reports and State for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) The Council of Insurance Agents & Broke	e and address of any politic	al com	nmitt								
Full Name (Last, First, Middle Initial) Chris Lee For Congress					Date	of Dis	sburse				
Mailing Address PO Box 15395					0 <sup>M</sup> 6	M /	<sup>D</sup> 1	<sup>D</sup> 2	¥ ;	ž 0 ŏ 9	Y
City Rochester	State Zip Code NY 14615	_			Amou	nt of	Each	Disbu		nt this F	-
Purpose of Disbursement  Candidate Name		_	01	1 Jory/				-	10	00.00	-
Mr. Christopher Lee  Office Sought:  X House Senate President  Disburs	ement For: 2010 Primary Genera Other (specify)		Тур								
 State: NY District: 26  Full Name (Last, First, Middle Initial)  Bilirakis For Congress					Trans Date of			ement		3 2 0 0 9	Y
Mailing Address 610 S. Boulevard	7.0				1						
City Tampa Purpose of Disbursement	State Zip Code FL 33606	T		-	Amou	nt of	Each	Disbu		nt this F 000.00	
Candidate Name Rep. Gus M. Bilirakis		Ca	01 ateg Typ	jory/							
ů X	ement For: 2010 Primary General Other (specify)										
Full Name (Last, First, Middle Initial) ERIC PAC					Trans Date	of Dis	sburse	ement	3294	-	
Mailing Address 209 Pennsylvania, SE					0 <sup>M</sup> 6	M /	<sup>D</sup> 1	2 /	Y .:	ž o ŏ 9	Y
City Washington	State Zip Code DC 20003				Amou	nt of	Each	Disbu		nt this F	
Purpose of Disbursement		_	Q1		<u></u>		-		2	500.00	
Candidate Name ERIC PAC			ateg Typ	ory/ e							
	ement For:										
Office Sought:    House   Disburs	Primary Genera Other (specify) ▼										

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SCHEDULE B (FEC Form 3X)	HEDULE B (FEC Form 3X)														
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NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·														
The Council of Insurance Agents & Brokers	Political Action Committe	е													
Full Name (Last, First, Middle Initial) Cole For Congress			Transaction ID: 30132949 Date of Disbursement												
Mailing Address P.O. Box 722256			0 6 M / D 1 2 / Y 2 0 0 9 Y												
	State Zip Code OK 73070		Amount of Each Disbursement this Period												
Purpose of Disbursement	Г		1000.00												
On distant Nove		011													
Candidate Name Rep. Thomas Cole		Category/ Type													
9 1	ment For: 2010 Primary General Other (specify)	Nice													
State: OK District: 04	Canon (opening)														
Full Name (Last, First, Middle Initial) The Richard Burr Committee			Transaction ID: 30132951 Date of Disbursement												
Mailing Address Post Office Box 5928	ing Address Post Office Box 5928														
•	State Zip Code NC 27113		Amount of Each Disbursement this Period 2000.00												
Purpose of Disbursement		011													
Candidate Name Rep. Richard Burr	C	Category/ Type													
X III	ment For: 2010 Primary General Other (specify)														
State: NC District: 05															
Full Name (Last, First, Middle Initial) Friends Of Bill Posey			Transaction ID: 30132957 Date of Disbursement												
Mailing Address P. O. Box 360877			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & Y \end{bmatrix} $												
	State Zip Code FL 32936		Amount of Each Disbursement this Period												
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Candidate Name Rep. Bill Posey		011 Category/ Type													
Office Sought:  X House Senate President  Disburse	ment For: 2010 Primary General Other (specify)	. урс													
State: FL District: 15															
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29							
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NAME OF COMMITTEE (In Full) The Council of Insurance Agents & Brol	kers Political Action Comn	nittee								
Full Name (Last, First, Middle Initial) Wicker For Senate			Transaction ID: 30132962 Date of Disbursement							
Mailing Address PO Box 64			06 12 7 2009							
City Jackson	State Zip Code MS 39205	_	Amount of Each Disbursement this Perio							
Purpose of Disbursement		011	4000.00							
Candidate Name Mr. Roger Wicker		Category/ Type								
X Senate President	x Primary									
State: MS District: Full Name (Last, First, Middle Initial)			Transaction ID: 20122072							
Harvest PAC			Transaction ID: 30132973  Date of Disbursement							
Mailing Address 236 Massachusetts A Suite 508	venue, NE		06 12 7 2009							
City Washington	State Zip Code DC 20002	_	Amount of Each Disbursement this Perio							
Purpose of Disbursement		011	2500.00							
Candidate Name Harvest PAC		Category/ Type								
Senate President	orsement For:  Primary  Genera  Other (specify) ▼									
State: District: Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Comr	nittee		Transaction ID: 30132981 Date of Disbursement							
Mailing Address 122 Maryland Avenue	NE		06 12 7 2009							
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Perio							
Purpose of Disbursement		011	15000.00							
Candidate Name		Category/ Type								
Candidate Name	ursement For: Primary General Other (specify)	Туре								

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$ \rangle$	The Council of Insurance Agents & Broker	s Political Action Comm	nittee	)									
<u>K</u>	Full Name (Last, First, Middle Initial)					Trans	acti	ion l	ID:	3013	2984	1	
•	Bill Foster For Congress Committee					Date	of D	isbu	rser				V
	Mailing Address PO Box 703					0 6	IVI	Ĺ	1 2	2 ′	2	0 0 0	9
	City Geneva	State Zip Code IL 60134				Amou	nt o	f Ea	ch [	Disburs	-	-	
	Purpose of Disbursement		Г	01	1		-	_	_		10	00.00	)
	Candidate Name Rep. Bill Foster			atec Typ	jory/ e								
	X X	ement For: 2010 Primary General Other (specify)	•										
	State: IL District: 14												
	Full Name (Last, First, Middle Initial) Holt for Congress					Date	of D	isbu	rser		2987	7	
	Mailing Address P.O. Box 782				0 <sup>M</sup> 6	М	/	1 2	2 /	2	o ŏ s	) Y	
	City Pennington	State Zip Code NJ 08534				Amou	nt o	f Ea	ch [	Disburs	emer	nt this I	Period
	Purpose of Disbursement		Г	01	1		_	_			10	00.00	)
	Candidate Name Rush D. Holt		\ \c		jory/								
	Office Sought: X House Disburs Senate X President	ement For: 2010 Primary General Other (specify)	•										
	State: NJ District: 12												
	Full Name (Last, First, Middle Initial) Frank for Congress					Date	of D	isbu	rser				V
	Mailing Address 38 Ivy Street, SE					0 <sup>M</sup> 6	М	Ĺ	1 2	2 ′	2	o ŏ s	)
	City Washington	State Zip Code DC 20003				Amou	nt o	f Ea	ch [	Disburs	emer	nt this I	Period
	Purpose of Disbursement	Тг	01	1	2500.00						)		
	Candidate Name Barney Frank			_	jory/								
		ement For: 2010 Primary General Other (specify)	1										
_	State: MA District: 04	-											
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	ers Folitical Action Collin	ınılee	
Full Name (Last, First, Middle Initial) Bon Vivant Catering			Transaction ID: 30133002 Date of Disbursement
Mailing Address 6330 Dunman Way			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Alexandria	State Zip Code VA 22315	1	Amount of Each Disbursement this Peri
Purpose of Disbursement Breakfast for Senator Bennet on 6-9-09 Candidate Name		011 Category/	580.80
Mr. Michael Bennet	rsement For: 2010 Primary X General Other (specify)	Type	Breakfast for Senator Ben- net on 6-9-09
Full Name (Last, First, Middle Initial) Richard E Neal For Congress Committee	)		Transaction ID: 30133006 Date of Disbursement  M M M P D D P P P D P P P P P P P P P P
Mailing Address 76 Magnolia Terrace			0 6 2 6 2 6 2 0 0 9
City Springfield	State Zip Code MA 01108		Amount of Each Disbursement this Peri
Purpose of Disbursement		011	4000.00
Candidate Name Rep. Richard E. Neal		Category/ Type	
X	sement For: 2010  X Primary General  Other (specify) ▼		
Full Name (Last, First, Middle Initial) Richard E Neal For Congress Committee	)		Transaction ID: 30133007 Date of Disbursement
Mailing Address 76 Magnolia Terrace			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Springfield	State Zip Code MA 01108		Amount of Each Disbursement this Peri
Purpose of Disbursement		011	1000.00
Candidate Name Rep. Richard E. Neal		Category/ Type	
Office Sought:    X   House   Disbute     Senate   President     State: MA   District: 02	sement For: 2010 Primary X General Other (specify)	•	
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S	CHEDULE B (FEC Form 3X)					E NUMBER: PAGE							41 / 41				
IT	EMIZED DISBURSEMENTS	for each o	ategory of the		(check only		_	_	r	_				_	1		
		Detailed S	Summary Page	⊢	21b 27		22 28a		23 28b	Щ	24 28c	Ц	25 29		26 30b		
Λ	y Information copied from such Reports and Statem	anta may na	+ bo oold oroo	- L						Ji a i t				<u>L</u>	300		
	for commercial purposes, other than using the name													5			
$\overline{\ }$	NAME OF COMMITTEE (In Full)																
$\rangle$	The Council of Insurance Agents & Brokers	Political /	Action Commi	ttee													
	Full Name (Last, First, Middle Initial)					Т	ransa	ctic	on ID:	30	01402	22					
	Kosmas For Congress					[	Date of	Dis	sburse	mei	nt						
	Mailing Address PO Box 1547					- [	0 <sup>M</sup> 6 M	′	<sup>D</sup> 2	9	/ Y	ž	0 0 9	Y			
		State FL	Zip Code 32170			1	Amoun	t of	Each	Disl	bursen	nen	this f	Perio	od		
	Purpose of Disbursement			0	11	419.20											
	Candidate Name Suzanne Kosmas				egory/ vpe												
		ment For: Primary Other (spec	2010 General														
	Full Name (Last, First, Middle Initial)					٠,		otic	n ID.	2	01403	202					
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	Purpose of Disbursement			0	11	]	1080.80							)			
	Candidate Name Suzanne Kosmas				egory/ /pe												
	Office Sought: X House Disburse Senate President	ment For: Primary Other (spec	2010 X General cify) ▼														

SUBTOTAL of Disbursements This Page (optional)	•	1500.00
TOTAL This Period (last page this line number only)	<b>•</b>	99080.80

State: FL

District: 24